## BEST AVAILABLE COPY

<b>PATENT</b>	<b>APPLICATIO</b>	ON FEE DETER	MINATION	RECORD
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Effective October 1, 2000

Application or Docket Number
09/68/9/6
5-4-1018

CLAIMS AS FILED - (Column			FILED - Column		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		14				ſ	RATE	FEE		RATE	FEE	
FOR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			( 4minus 20=		· 16			X\$ 9=		OR	X\$18=	Ø
INDEPENDENT CLAIMS			7. minus 3 =		· 4			X40=		OR	X80=	320
MULTIPLE DEPENDENT CLAIM PRESENT .					. (			+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2					olumn 2		TOTAL		OR	TOTAL	1030	
2-22-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						)	SMALL E	NTITY	OR	OTHER SMALL	THAN	
AMENDMENT A	· · · · · · · · · · · · · · · · · · ·	CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOM	Total	. 14	Minus	2	20	= —		X\$ 9=		OR	<del>5-0</del> X\$ <del>18</del> ⇒-	
AME	Independent	• 7	Minus	***	7	=		X40=		OR	<del>260</del> =	)
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	+135=		OR	360 <del>12</del> 70=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3			•	-	,	
AMENDMENT B	10 By	CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		-	4	X40=		OR	X80≃	
L	FIRST PRESE	NTATION OF MI	JETIPLE DEF	ENDEN	T CLAIM			+135=		OR	+270=	
		•						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3	)_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	T CI AIN	<u> </u>	┨╏	X40=		OR	X80=	·
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	I CLAIM		┛┃	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											